



LOS ANGELES COUNTY COMMISSION ON HIV

3530 Wilshire Boulevard, Suite 1140 • Los Angeles, CA 90010 • TEL (213) 738-2816 • FAX (213) 637-4748
www.hivcommission-la.info

While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV Health Services are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.

PRIORITIES AND PLANNING (P&P) COMMITTEE MEETING MINUTES

May 13, 2008

Approved
5/21/2008

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	HIV EPI AND OAPP STAFF	COMM STAFF/CONSULTANTS
Jeff Goodman, <i>Co-Chair</i>	Kathy Watt, <i>Co-Chair</i>	Teresa Castillo	Juhua Wu	Jane Nachazel
Mario Chavez	Eric Daar	Miguel Fernandez		Glenda Pinney
Joanne Granai	Douglas Frye	Veronica Geronimo		Craig Vincent-Jones
Michael Green		Anita Le		
Bradley Land		Trip Oldfield		
Anna Long		Rose Veniegas		
Quentin O'Brien				

CONTENTS OF COMMITTEE PACKET

- 1) **Agenda:** Priorities and Planning (P&P) Committee Agenda, 5/13/2008
- 2) **Minutes:** Priorities and Planning (P&P) and Standards of Care (SOC) Joint Committee Meeting, 1/22/2008
- 3) **Minutes:** Priorities and Planning (P&P) Committee Meeting, 2/26/2008
- 4) **Minutes:** Priorities and Planning (P&P) Committee Meeting, 3/25/2008
- 5) **Minutes:** Priorities and Planning (P&P) Committee Meeting, 4/22/2008
- 6) **Memorandum:** Criteria for Nomination of Non-Commission P&P Committee Members, 5/13/2008
- 7) **Policy/Procedure:** Service Category Presentation Guidelines, 5/13/2008
- 8) **Report:** Los Angeles Coordinated HIV Needs Assessment (LACHNA), 5/13/2008
- 9) **Table:** Service Category Summary Sheet, 5/09/2008
- 10) **Summary Sheets:** Year 17 Service Category Summary Sheets, 5/09/2008
Categories: Case Management, Medical; Case Management, Psychosocial; Dental Services; Food Bank/Home-Delivered Meals, Nutrition Support; Legal Services; Medical Services; Medical Services, Medical Specialty; Mental Health Services, Psychiatry; Mental Health Services, Psychotherapy; Nutritional Counseling, Medical Nutrition Therapy; Other Services, Language Services; Psychological Support Services, Peer Support; Residential or In-Home Hospice Services, Hospice and Skilled Nursing Services; Residential or In-Home Hospice Services, Transitional Housing; Substance Abuse Services – Outpatient; Substance Abuse Services – Residential; Transportation; Treatment Adherence Services, Treatment Education.

1. **CALL TO ORDER:** Mr. Goodman called the meeting to order at 1:55 pm.
2. **APPROVAL OF AGENDA:**
MOTION #1: Approve the Agenda Order with Items 10, 11, and 14 postponed (*Passed by consensus*).
3. **APPROVAL OF MEETING MINUTES:**
MOTION #2: Approve the 1/22/2008 P&P Committee Meeting minutes, as presented (*Passed by consensus*).
MOTION #3: Approve the 2/26/2008 P&P Committee Meeting minutes, as presented (*Passed by consensus*).
MOTION #4: Approve the 3/25/2008 P&P Committee Meeting minutes, as presented (*Passed by consensus*).
MOTION #5: Approve the 4/22/2008 P&P Committee Meeting minutes, as presented (*Passed by consensus*).
4. **PUBLIC COMMENT, NON-AGENDIZED:** There were no comments.

5. **COMMISSION COMMENT, NON-AGENDIZED:** Mr. Land received a letter from the state at the end of April affirming payment of his Medicare Part B premium. It seemed those who received services during the Medicare Part D transition period to dual Medi-Cal/Medicare eligibility in 1998-2000 were more likely to receive them. This could pertain to utilization issues.
6. **PUBLIC/COMMISSION COMMENT FOLLOW-UP:** There were no comments.
7. **CO-CHAIRS' REPORT:**
 - ➡ It was confirmed that the meeting would return to its regular 1:30 to 4:30 p.m. time. There would be two meetings in June: a special meeting on June 17th to review OAPP allocation recommendations and a regular meeting on June 24th to set allocations.
 - A. **Other Committee Members:**

MOTION #6: Approve the Criteria for Nomination of Non-Commission P&P Committee members with the addition of preferences for non-Ryan White funded providers and for maintaining consumer balance (*Passed by Consensus*).
8. **SERVICE CATEGORY PRESENTATIONS:** It was agreed that OAPP contract managers would structure presentations, including possible provider representatives. Presentations would focus on deep investigation of service categories rather than preparation for a particular P-&-A cycle. The P&P Committee would determine which categories to review, approve an annual schedule, and provide needs assessment and standards data as needed. Alternative viewpoints could be presented in public comment. Dr. Green said that OAPP could not schedule more than four of these per year, given the work that it would require of staff—there may be special issues that give rise to additional presentations that are needed during the year.

MOTION #7: Adopt Service Category Presentation Guidelines with three Procedure changes. Point 2: Revise to read, "...the Commission Executive Director and/or P&P Committee Co-Chairs in consultation with OAPP will prioritize a schedule..." Point 3: Revise to read "A quarterly formal service category presentation will be provided at regularly scheduled..." Add Point 7: "Available presentation materials will be posted on the website." (*Passed by Consensus*).
9. **YR 19 PRIORITY- AND ALLOCATION-SETTING:**
 - A. **Needs Assessment Data:**
 - Dr. Veniegas presented on the LACHNA HIV+ preliminary data. Five hundred and seventy five randomly selected participants completed 30- to 60-minute face-to-face interviews. In general, longer surveys were completed by those in care. Most of the care surveys were conducted in clinics and service provider sites. A small sample of care surveys were conducted at day labor sites, parks, and bars.
 - Dr. Veniegas presented demographic data. In addition to requesting gender orientation, a follow-up yes/no question increased the number identifying as transgender from 35 to 44. Medi-Cal/Medicaid enrollment was reported at 48.5%. There were 27 HIV+ participants who reported never being in care, another 219 reported returning to care after 12 months. Dr. Veniegas will confirm this number.
 - Dr. Veniegas continued with a comparison of needed services reported for 2005 and 2007. She noted little change among the top 5: Outpatient Medical, Dental, Bus Passes, Food Pantry, and Medical Nutrition Therapy. Medical Specialty went from 7 in 2005 to 10 in 2007. Local Drug Reimbursement was not in the top 10 for 2005, but was 6 in 2007. The top five substances reported in 2005 were: alcohol, marijuana/hash, crack/cocaine, poppers, and crystal meth. In 2007 the top five substances were: alcohol; meth; other drugs, not including club drugs; poppers, and crack.
 - B. **Services Utilization:**
 - Dr. Green presented data from the summary of service categories from Years 15, 16, and 17 and individual Year 17 Service Category Summary Sheets. He noted that 11 months of Year 17 data was primarily actual expenditures while the last month was projected expenditures, but were not expected to vary significantly. Expenditures were not given for Medical Specialty, Mental Health/Psychiatry, and Hospice/Skilled Nursing Facility Services in Years 15 and 16, as well as Medical Nutrition Therapy and Treatment Education in Year 16 (blocked in gray) because they were not tracked separately at that time. Some contracted service unit and client fields were not completed due to time limitations (blocked in yellow), but delivered service units and clients served were included. Unverified data was blocked in pink. There was no service category summary sheet for Child Care Services because it was not funded in Year 17.
 - Case Management, Medical expenditures increased from Year 16 to 17 due to MAI, but client numbers do not yet reflect that. Mr. Oldfield said CaseWatch did not capture all Legal Services and offered to provide better data for Years 16 and 17. Translation/Interpretation data did not reflect trainings. Dr. Green noted CaseWatch had previously blocked service data from being revealed until completion of the eligibility screening. Currently the only fee-for-service categories were: Substance Abuse Treatment and Residential; Residential, Transitional; and Hospice and Skilled Nursing.

Hospice/Skilled Nursing "visits" reflected bed days. It appeared that the number of patients for Hospice/Skilled Nursing only included Hospice, but expenditures included both.

- OAPP would add a summary sheet for Home Health Professional Care which was funded through NCC.
- Committee members agreed to review material and send questions by May 20th to Ms. Pinney who would coordinate answers on needs assessment with Dr. Veniegas and on utilization with Dr. Green prior to the next meeting. Ms. Pinney would also e-mail the change matrix work sheet, epidemiology data, provider forum summaries, and financial expenditure reports to Committee members to assist them with their document review for the May 27 meeting.
- It was agreed that the Committee Co-Chairs working with OAPP would present the service utilization data and the Commission would set present the needs assessment data at the June Commission meeting.

10. **FINANCIAL REPORTS:** There was no report.

11. **COMMITTEE WORK PLAN UPDATE:** The item was postponed.

12. **2009 COMPREHENSIVE CARE PLAN:** The item was postponed.

13. **DATA SUMMIT PLANNING:** There was no report.

14. **SERVICE PROVIDER NETWORKS:** The item was postponed.

15. **GEOGRAPHIC ESTIMATE OF NEED:** The item was postponed.

16. **OTHER STREAMS OF FUNDING:** The item was postponed.

17. **STANDING SUBCOMMITTEES:** There were no reports.

18. **NEXT STEPS:** The item was postponed.

21. **ANNOUNCEMENTS:** There were no announcements.

22. **ADJOURNMENT:** The meeting was adjourned at 4:30 pm.